								J A	Application	or Docket Number		
PATENT APPLICATION FEE DETERMINATION RECO								9/23/03				
		Effec		10670162								
CLAIMS AS FILED - PART I									NTITY	OTHER THAN		
			(Column	1 1)	(Column 2)		TYPE		OR	•		
TOTAL CLAIMS			1				RAT	E	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 385.00		OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		*		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		*		X43=			OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				+145=			OR	+290=:-	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in o	0" in column 2		TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II								-			OTHER	
(Column 1) (Column 2) (Column 3)							SMA	LL:	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 28	Minus	**	20	= 8	X\$ 9)=		OR	X\$18=	144
	Ind pendent	. 2	Minus	***		=	X43	=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		+145	_		1	+290=	
•						*4	<u> </u>	TAL		OR	TOTAL	
							ADDIT.		L	OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 26	Minus	**		= 0	X\$ 9	=		OR	X\$18=	
	Independent	• 2	Minus	***	O1 C111	= 0	X43	=	e.	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	=	است	ÖR	+290=	•
								FE.		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X43=			OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							{		OH		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								-		OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE	
		mber Previously Pa ber Previously Paid					found in the	ann	ropriate hov	in coli	umn 1.	